附件2

活动报名表

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| 序号 | 江苏机构名称 | 姓名 | 职务 | 手机号码 | 邮箱 | 意向对接的以方机构 |
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备注：请意向参会单位填写此表，于8月18日前发送至电子邮箱yue\_jittc@163.com。